



UNITED STATES SENATOR ROLAND W. BURRIS
CHICAGO OFFICE

PRIVACY ACT RELEASE FORM

The provisions of Public Law 93-579 (Privacy Act of 1974) prohibit the disclosure of information of a personal nature from the files of an individual without their consent.

Accordingly, I authorize the staff of Senator Roland Burris to access any and all of my records that relate to the problem stated below.

Signature: _____ Date: _____

To begin processing your case, please complete the following information:

Name: Mr. Mrs. Ms. _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____ Home Phone: _____

Place of Work: _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Email Address: _____

Social Security Number: _____

Briefly explain your problem in detail or the information desired: (Please tell us

specifically how our office can help)

PLEASE RETURN YOUR COMPLETED FORM TO ONE OF SEN. BURRIS' STATE OFFICES:

230 S. Dearborn St., Ste. 3900
Chicago, IL 60604
(312) 886-3506-Phone
(312) 886-3514 – FAX

607 E. Adams St
Springfield, IL 62703
(217) 492-5089-Phone
(217) 492-5099 – FAX

721 N. Court Street
Marion, IL 62959
(618) 997-2850 – FX